How to keep Well – an aspect of wellness Germ versus terrain theory

by Chris Hill



Sickness and health matters are the theme of Chris's life; even her dolls spent most of their time bandaged! At school she was the First Aid Prefect. She became a nurse, midwife and health visitor and worked in London's East End. She had four children, one of whom died after a smallpox jab. Many years later, Robert Davidson became her homeopathic mentor. In practice she watched patients recover their health. Chris's special interest was infertility treatment and helping to deliver babies.

Are you concerned about keeping well? Since COVID hit us, the general mood still seems to maintain these feelings of stress and fear that it brought us. Now is the time to take responsibility for our health – by eating well, sleeping soundly, exercising adequately, de-stressing and generally living and learning to enjoy life again.

So why is there so much ill health? I can understand why the NHS is falling apart. There are now so many more named diseases and syndromes. Some illnesses have disappeared, others have been rebranded. Nowadays, there seems to be a pill for every ill. Are we happy and really well? No. Many have become dependent on a daily drug regime and an increasing number of vaccinations. Modern medicine claims to prevent many infections and diseases. One in ten people over the age of 65 take at least eight different prescribed medicines weekly (ageuk. org.uk). Life expectancy began to decline even before the pandemic.

We are aiming to build more and more hospitals and using more technology in treatment. However, we now have less interaction with those directly involved with our care. The NHS is just about the biggest employer in Europe with 1.27 million employees as of 2022 (healthmedia. blog.gov.uk), nothing to boast about in my opinion. There is an increase in iatrogenic disease. The prevalence and cost of managing chronic disease is rising. The incidence of cancer and Alzheimer's disease is a threat to the quality of life, especially as these and other diseases are now detected in much younger people.

Neurodevelopmental disorders such as ADHD and autism, conditions that affect how the brain functions, are now more prevalent. Approximately one in 100 children in the UK are on the spectrum today (tpathways.org), which affects family life; more care is needed within the NHS, and extra education facilities.

The number of Caesarean births has increased from 2% in the 1960s (theatlantic.com) to 34.5% now (gov.scot). We now have more live births, but many more complicated deliveries requiring obstetrician intervention, less so in midwife-led units. The UK has one of the lowest number of breastfed babies in the world. Infertility rates are increasing. One in seven couples have problems conceiving (nhs.uk). Regrettably, if couples cannot conceive their health must, in some way, be compromised.

I was born in 1939 near the outbreak of World War II. In London, we suffered from the fear of bombs, especially flying doodlebugs. At home, we had Anderson and Morrison shelters. My school had a tunnel under the sports field where we huddled when the sirens shrieked. The fear factor in the community was palpable but, as children, it was the only way of living we knew. News of the war



for us only came via the radio and newspapers. No videos on TV from news correspondents.

In my childhood, the NHS was new (it was founded 5 July 1948). Vaccines were discussed before decisions were made whether or not to immunise, and only four vaccines were available in 1948 - three combined as the DPT vaccine for diphtheria, pertussis (whooping cough), and tetanus whilst the smallpox vaccine was available from 1948 to 1962 (atlantichealthpartners.com, ncbi.nlm. nih.gov). If our friends had measles, rubella or chicken pox, we would have a party to infect each other look how far we have come! These diseases were perceived as childhood milestones, and new research agrees with that statement. The great age of penicillin and other antibiotics began in the mid-1940s.

If we were unwell our mothers kept us away from school and in bed. The absolute treat was a coal fire in the bedroom, a cosy hot water bottle, lots of warm drinks and stories. Aspirin for pain and fevers became widely available, but I don't remember ever having any. Fevers were seen as important. The only 'supplement' to good health was cod liver oil and orange juice, supplied by the Ministry of Health and available at welfare clinics.

I only mention those early years in contrast to now, as our approach to disease and its treatment seemed less complicated then. Despite apparent progress in medicine and surgery, the rate of ill health now seems greater. We do not blame the fireman for the fire

Despite apparent progress in medicine and surgery, the rate of ill-health now seems to be greater

I feel the fear of the recent pandemic was media driven and exaggerated beyond belief; the damage to our mental health unbelievable. Did the virus really have to be painted red and spikey? Could it not have been a mushy brown blob – far less alarming!

I worked as a nurse, midwife and health visitor from the late 1950s. My great interest in health and getting people better continued. In the 1980s I qualified in homeopathic medicine and had my own practice. I had learned a new way of looking at disease, a fundamentally different approach; rather than killing the germ and symptoms, the better treatment is to strengthen the body to heal itself. This way of prescribing obeys the terrain (body) theory of medicine rather than the germ theory.

The germ theory – the accepted 'mainstream' theory at the moment – states that specific germs are the cause of specific diseases. The theory was developed, proved (not conclusively) and popularised in Europe and North America between 1850 and 1920 (curiosity.lib.harvard. edu), and is accepted by all doctors

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working in Western medicine. This is how it works: if I am diagnosed with the germ giving symptoms of scarlet fever, I will be given an antibiotic to kill the germ.

On the other hand, the terrain theory states that germs are not the cause of the disease but are found in the terrain-environment where the sickness is present. So, if I am diagnosed with scarlet fever, the terrain theory's treatment would not be to kill the germ but to alleviate the diseased conditions of the 'terrain' itself.

Antoine Béchamp created the terrain theory and, I quote:

Terrain theory argues that if the body is well and balanced then the germs that are a natural part of life and the environment will be dealt with by the body without causing sickness. Germs seek their natural habitat, diseased tissue, rather than being the cause of 'diseased tissue'. The 'terrain' or body will attract germs to come as scavengers of the weakened or poorly defended tissue. (wikipedia.org)

Does this explain predisposition or susceptibility? Similarly, viruses are toxin-gobbling messengers that our cells produce to help us adjust to environmental assaults just like a detoxification package! The terrain theory is focused on the body's ability to stave off disease.

How did the germ theory become accepted in Western medicine? A research 'battle' took place between Pasteur and Béchamp, both scientists searching for the root cause of disease in the late 19th century. Louis Pasteur, a familiar name to us all, promulgated the germ theory and stole appropriate research from Béchamp who advocated the terrain theory. Pasteur, with the help of his influential friends in high places, pushed through his own ideas and won the 'battle' but, on his deathbed, he retracted everything and announced that Béchamp's terrain theory was indeed correct. However, the germ theory took off ...

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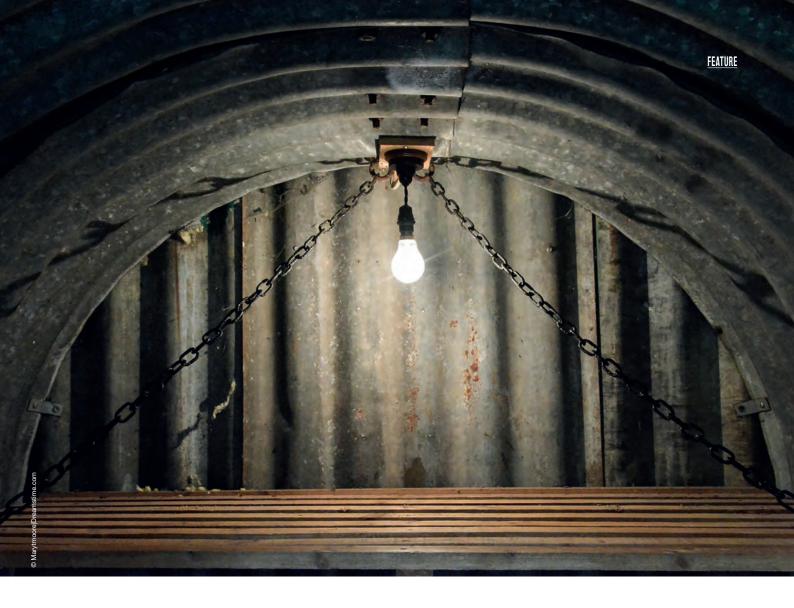
exist in the body are quiet yet alert. In a human body, there are 37 trillion cells but 39 trillion microbes, which are made up of fungi, bacteria and viruses. In a completely healthy body, everything is in balance. When the body is out of balance, the microorganisms become active causing symptoms of sickness, which is actu-

ally the body trying to heal itself.

environment, then the microbes that

It seems there's a pill for every ill





The wellness of the body determines the severity of symptoms. Germs and bacteria are the scavengers of nature. They reduce dead tissue to its smallest element. They do not have any influence on live tissue; they live on waste. They are not the cause of disease any more than flies and maggots cause refuse. It's not about germs, it's about terrain. We do not blame the fireman for the fire!

Everything in the world is interconnected and our body can learn to cope with many changes and influences. If it can't, it tries hard to adapt. Drugs given for a symptom prevents the body from treating the underlying cause. However, treatment given to assist the body in its healing can prevent the imbalance from escalating into a more serious condition or disease in the future. For example, repeated ear infections treated with antibiotics can eventually turn into glue ear and hearing loss.

In a very positive way, germs or bacteria are the opposite of our enemies, indeed they are our health-giving friends. So we know the symptoms of the illness can be treated differently. If, when taking a patient's history, one can work out the aetiology ('never been well since ...') then, like a detective, we can discover the origins of the disease on a mental or physical level. The world is not full of scary pathogens that lurk around to kill us.

Acupuncture, homeopathy and Ayurvedic medicines are among the treatments that are in tune with terrain theory. I believe that all types of medical treatment are relevant and can be used appropriately to relieve and heal the sick and work together in harmony.

Returning to my original question, how is the fitness of your family? There may be some aspects of health that can be looked at more holistically. This concept may explain how some of us are more prone to disease than others, how individual symptomology may be different, yet the disease is given the same name. During the pandemic this factor has been a constant dilemma. If each type of

During Chris's wartime childhood, they had air raid shelters at home medical care could be appropriate to the patient's individual state of illness, we would be more likely to reach or maintain a state of complete physical, mental and emotional wellbeing.

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